



# CITY OF ROY

## APPLICATION FOR BUSINESS LICENSE

APPLICATION IS HEREBY MADE FOR A BUSINESS LICENSE FOR THE CITY OF ROY,  
WASHINGTON.

DATE \_\_\_\_\_

BUSINESS  
NAME \_\_\_\_\_

OWNER \_\_\_\_\_

MAILING  
ADDRESS \_\_\_\_\_

TYPE OF  
BUSINESS \_\_\_\_\_

TELEPHONE  
NUMBER \_\_\_\_\_

STATE DEPT. OF REVENUE  
TAX NUMBER \_\_\_\_\_

CONTRACTOR'S REGISTRATION # \_\_\_\_\_  
(IF APPLICABLE)

PIERCE COUNTY HEALTH APPROVAL # \_\_\_\_\_  
(IF APPLICABLE)

Under penalties of perjury, I declare that I have examined the  
foregoing and to the best of my knowledge and belief, declare it to be  
true, complete and correct.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

Business licenses are issued for a one-year period beginning on  
February 1 of each year and ending on January 31 of the following year.

Please submit your check for \$45.00.

PO Box 700 Roy, WA 98580